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CONFIRMATION NO. 7820

<b>SERIAL NUMBER</b> 10/702,149	<b>FILING OR 371(c) DATE</b> 11/04/2003 <b>RULE</b>	<b>CLASS</b> <del>538</del> 514	<b>GROUP ART UNIT</b> 1626	<b>ATTORNEY DOCKET NO.</b> PC25146A	
<b>APPLICANTS</b> Robert L. Dow, Groton, CT; Mariys Hammond, Blue Bell, PA; <i>MP</i>					
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/432,911 12/12/2002 <i>MP</i>					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 03/15/2004</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met <i>allowance</i> Verified and Acknowledged <i>MP</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> CT	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 22 11	<b>INDEPENDENT CLAIMS</b> 2 <i>*</i>
<b>ADDRESS</b> 28523					
<b>TITLE</b> Cannabinoid receptor ligands and uses thereof					
<b>FILING FEE RECEIVED</b> 1402	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		